

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
2007 MAR -7 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000122231

1. Corporation Name

SPEED INVESTMENT CORP.

500093744505
03/19/07--01051--018 **450.00

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #
4638 SW 134 AVENUE

3. Mailing Office Address
4638 SW 134 AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
MIRAMAR, FL.

City & State
MIRAMAR, FL.

Zip
33027 Country
USA

Zip
33027 Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida **08/24/2004**

5. FEI Number
743129185

Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
RONALD TORRES

Street Address (P.O. Box Number is Not Acceptable)
4638 SW 134 AVENUE

Suite, Apt. #, Etc.

City
MIRAMAR, FL.

State
FL Zip Code
33027

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **3/5/07**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	RONALD TORRES	4638 SW 134 AVENUE	MIRAMAR, FL. 33027
VP	LESLIE TORRES	4638 SW 134 AVENUE	MIRAMAR, FL. 33027
T	ANDRES CARRODEGUAS	4638 SW 134 AVENUE	MIRAMAR, FL. 33027

REINSTATEMENT

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/07
Date

(305) 962-9590
Daytime Phone #